

DECLARATION AND POWER OF ATTORNEY

INIE & EDMONDS DOCKET NO.

6453-002

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name,

I believe I am the original, first and sole inventor if only one name is listed at 201 below, or an original, first and joint inventor if plural names are listed at 201 et seq. below, of the subject matter which is claimed and for which a patent is sought on the invention entitled

MONOCLONAL ANTIBODIES TO A NEW ANTIGENIC MARKER IN EPITHELIAL
PROSTATIC CELLS AND SERUM OF PROSTATIC CANCER PATIENTS

the specification of which:

☒ is attached hereto ☐ was filed on as Application Serial No.
(for declaration not accompanying application)

with amendment(s) filed
(If applicable)

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, § 1.56(a).

I hereby claim foreign priority benefits under Title 35, United States Code, § 119/§ 172 of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:

EARLIEST FOREIGN APPLICATION(S), IF ANY, FILED PRIOR TO THE FILING DATE OF THE APPLICATION			
APPLICATION NUMBER	COUNTRY	DATE OF FILING (day, month, year)	PRIORITY CLAIMED UNDER 35 U.S.C. 119/172
			YES _____ NO _____
			YES _____ NO _____
			YES _____ NO _____
			YES _____ NO _____

I hereby claim the benefit under Title 35, United States Code, § 120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code § 112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, § 1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

APPLICATION SERIAL NO.	FILING DATE	STATUS		
		PATENTED	PENDING	ABANDONED

POWER OF ATTORNEY: As a named inventor, I hereby appoint Frank F. Scheck (Reg. No. 17761), S. Leslie Misrock (Reg. No. 18872), Harry C. Jones, III (Reg. No. 20280), Berj A. Terzian (Reg. No. 20060), Gerald J. Flintoft (Reg. No. 20823), David Weild, III (Reg. No. 21094), Jonathan A. Marshall (Reg. No. 24614), Joseph V. Colaianni (Reg. No. 20019), Charles E. McKenney (Reg. No. 22795), Philip T. Shannon (Reg. No. 24278), Barry D. Rein (Reg. No. 22411), Stanton T. Lawrence, III (Reg. No. 25736), Francis E. Morris (Reg. No. 24615), Joseph J. Catanzaro (Reg. No. 25837), Charles E. Miller (Reg. No. 24576), Gidon D. Stern (Reg. No. 27469), John J. Lauter, Jr. (Reg. No. 27814), Brian M. Poissant (Reg. No. 28462), Brian D. Coggio (Reg. No. 27624), Rory J. Radding (Reg. No. 28749), Stephen J. Harbulak (Reg. No. 29166), Donald J. Goodell (Reg. No. 19766), and James N. Palik (Reg. No. 25510), whose address is Pennie & Edmonds, 1155 Avenue of the Americas, New York, New York 10036, and each of them, my attorneys, to prosecute this application, and to transact all business in the Patent and Trademark Office connected therewith.

SEND CORRESPONDENCE TO: PENNIE & EDMONDS 1155 AVENUE OF THE AMERICAS NEW YORK, N.Y. 10036				DIRECT TELEPHONE CALLS TO: PENNIE & EDMONDS (212) 790-9090	
201	FULL NAME OF INVENTOR	LAST NAME HOROSZEWICZ	FIRST NAME JULIUS 40100	MIDDLE NAME S.	
	RESIDENCE & CITIZENSHIP	CITY Williamsville	STATE OR FOREIGN COUNTRY New York NY	COUNTRY OF CITIZENSHIP U.S.A.	
	POST OFFICE ADDRESS	POST OFFICE ADDRESS 2210 North Forest Road	CITY Williamsville	STATE OR COUNTRY New York	ZIP CODE 14221
202	FULL NAME OF INVENTOR	LAST NAME	FIRST NAME	MIDDLE NAME	
	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP	
	POST OFFICE ADDRESS	POST OFFICE ADDRESS	CITY	STATE OR COUNTRY	ZIP CODE
203	FULL NAME OF INVENTOR	LAST NAME	FIRST NAME	MIDDLE NAME	
	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP	
	POST OFFICE ADDRESS	POST OFFICE ADDRESS	CITY	STATE OR COUNTRY	ZIP CODE
204	FULL NAME OF INVENTOR	LAST NAME	FIRST NAME	MIDDLE NAME	
	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP	
	POST OFFICE ADDRESS	POST OFFICE ADDRESS	CITY	STATE OR COUNTRY	ZIP CODE
205	FULL NAME OF INVENTOR	LAST NAME	FIRST NAME	MIDDLE NAME	
	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP	
	POST OFFICE ADDRESS	POST OFFICE ADDRESS	CITY	STATE OR COUNTRY	ZIP CODE
206	FULL NAME OF INVENTOR	LAST NAME	FIRST NAME	MIDDLE NAME	
	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP	
	POST OFFICE ADDRESS	POST OFFICE ADDRESS	CITY	STATE OR COUNTRY	ZIP CODE

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

SIGNATURE OF INVENTOR 201 <i>Julius S. Horoszewicz</i>	SIGNATURE OF INVENTOR 202	SIGNATURE OF INVENTOR 203
DATE May 3, 1988	DATE	DATE
SIGNATURE OF INVENTOR 204	SIGNATURE OF INVENTOR 205	SIGNATURE OF INVENTOR 206
DATE	DATE	DATE

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re: ☒ Application of: JULIUS S. HOROSZEWICZ
☐ Patent of:

☐ Serial No.: TO BE ASSIGNED Group Art Unit:
☐ Patent No.:

☒ Filed: CONCURRENTLY HEREWITH Examiner:
☐ Issued:

For: MONOCLONAL ANTIBODIES TO A NEW ANTIGENIC MARKER IN
 EPITHELIAL PROSTATIC CELLS AND SERUM OF PROSTATIC CANCER PATIENTS

Attorney Docket No.: 6453-002

VERIFIED STATEMENT (DECLARATION) CLAIMING SMALL ENTITY STATUS
 [37 CFR 1.9(f) and 1.27(b)]—Independent Inventor

Honorable Commissioner of Patents and Trademarks
 Washington, D.C. 20231

Sir:

As a below named inventor, I hereby declare that I qualify as an independent inventor as defined in 37 CFR 1.9(c) for purposes of paying reduced fees under section 41(a) and (b) of Title 35, United States Code, to the Patent and Trademark Office with regard to the invention entitled... MONOCLONAL ANTIBODIES TO A NEW ANTIGENIC... MARKER IN EPITHELIAL PROSTATIC CELLS AND SERUM OF PROSTATIC CANCER PATIENTS... described in

- ☒ the specification filed herewith
☐ application serial no. filed,
☐ patent no. issued

I have not assigned, granted, conveyed or licensed and am under no obligation under contract or law to assign, grant, convey or license, any rights in the invention to any person who could not be classified as an independent inventor under 37 CFR 1.9(c) if that person had made the invention, or to any concern which would not qualify as a small business concern under 37 CFR 1.9(d) or a nonprofit organization under 37 CFR 1.9(e).

Each person, concern or organization to which I have assigned, granted, conveyed, or licensed or am under an obligation under contract or law to assign, grant, convey, or license any rights in the invention is listed below:

- ☐ no such person, concern, or organization
☐ persons, concerns or organizations listed below*

*NOTE: Separate verified statements are required from each named person, concern, or organization having rights to the invention averring to their status as small entities.
 (37 CFR 1.27)

FULL NAME.....

ADDRESS

☐ INDIVIDUAL ☐ SMALL BUSINESS CONCERN ☐ NONPROFIT ORGANIZATION

FULL NAME.....

ADDRESS

☐ INDIVIDUAL ☐ SMALL BUSINESS CONCERN ☐ NONPROFIT ORGANIZATION

FULL NAME.....

ADDRESS

☐ INDIVIDUAL ☐ SMALL BUSINESS CONCERN ☐ NONPROFIT ORGANIZATION

FULL NAME.....

ADDRESS

☐ INDIVIDUAL ☐ SMALL BUSINESS CONCERN ☐ NONPROFIT ORGANIZATION

I acknowledge the duty to file, in this application or patent, notification of any change in status resulting in loss of entitlement to small entity status prior to paying, or at the time of paying, the earliest of the issue fee or any maintenance fee due after the date on which status as a small entity is no longer appropriate. [37 CFR 1.28 (b)]

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this verified statement is directed.

Send correspondence to: PENNIE & EDMONDS
1155 Avenue of the Americas
New York, N.Y. 10036

Direct Telephone calls to:
PENNIE & EDMONDS
(212) 790-9090

NAME OF INVENTOR Julius S. Horoszewicz	NAME OF INVENTOR	NAME OF INVENTOR
SIGNATURE OF INVENTOR <i>Julius S. Horoszewicz</i>	SIGNATURE OF INVENTOR	SIGNATURE OF INVENTOR
DATE 5-3-88	DATE	DATE
NAME OF INVENTOR	NAME OF INVENTOR	NAME OF INVENTOR
SIGNATURE OF INVENTOR	SIGNATURE OF INVENTOR	SIGNATURE OF INVENTOR
DATE	DATE	DATE